

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference: R00579.70000
(if desired) (12 characters maximum)

Box No. I TITLE OF INVENTION

APPARATUS FOR DISPLAYING CULINARY, HORTICULTURAL OR FLORAL ITEMS

Box No. II APPLICANT

Name and address: (Family name, followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

RAMIREZ, Steven W.
6 Lois Lane
Sharon, Massachusetts 02067
United States of America

☒ This person is also inventor.

Telephone No.

Facsimile No.

Teleprinter No.

State (that is, country) of nationality: US

State (that is, country) of residence: US

This person is applicant for the purposes of:

☒ all
designated
States

☐ all designated States except
the United States of America

☐ the United States
of America only

☐ the States indicated in
the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name, followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

This person is:

- ☐ applicant only
☐ applicant and inventor
☐ inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for the purposes of:

☐ all designated
States

☐ all designated States except
the United States of America

☐ the United States
of America only

☐ the States indicated in
the Supplemental Box

☐ Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

☒ agent ☐ common representative

Name and address: (Family name, followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

Telephone No.
617 720-3500

Facsimile No.
617 720-2441

Teleprinter No.

FERRARO, Neil P.
Wolf, Greenfield & Sacks, P.C.
600 Atlantic Avenue
Boston, Massachusetts 02210
United States of America
Address for correspondence

☐ Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Box No. V DESIGNATION OF STATES

The following designations are hereby made under Rule 4.9(a) (mark the applicable check-boxes; at least one must be marked):

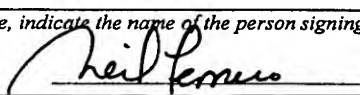
Regional Patent

- ☒ AP ARIPO Patent: GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, SD Sudan, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZW Zimbabwe, ZM Zambia and any other State which is a Contracting State of the Harare Protocol and of the PCT
- ☒ EA Eurasian Patent: AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT
- ☒ EP European Patent: AT Austria, BE Belgium, BG Bulgaria, CH and LI Switzerland and Liechtenstein, CY Cyprus, CZ Czech Republic, DE Germany, DK Denmark, EE Estonia, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, HU Hungary, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, RO Romania, SE Sweden, SI Slovenia, SK Slovakia, TR Turkey and any other State which is a Contracting State of the European Patent Convention and of the PCT
- ☒ OA OAPI Patent: BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GQ Equatorial Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT

National Patent (if other kind of protection or treatment desired, specify on dotted line):

- | | |
|--|--|
| <input checked="" type="checkbox"/> AL Albania | <input checked="" type="checkbox"/> LS Lesotho |
| <input checked="" type="checkbox"/> AM Armenia | <input checked="" type="checkbox"/> LT Lithuania |
| <input checked="" type="checkbox"/> AT Austria | <input checked="" type="checkbox"/> LU Luxembourg |
| <input checked="" type="checkbox"/> AU Australia | <input checked="" type="checkbox"/> LV Latvia |
| <input checked="" type="checkbox"/> AZ Azerbaijan | <input checked="" type="checkbox"/> MD Republic of Moldova |
| <input checked="" type="checkbox"/> BA Bosnia and Herzegovina | <input checked="" type="checkbox"/> MG Madagascar |
| <input checked="" type="checkbox"/> BB Barbados | <input checked="" type="checkbox"/> MK The former Yugoslav Republic of Macedonia |
| <input checked="" type="checkbox"/> BG Bulgaria | <input checked="" type="checkbox"/> AE United Arab Emirates |
| <input checked="" type="checkbox"/> BR Brazil | <input checked="" type="checkbox"/> MN Mongolia |
| <input checked="" type="checkbox"/> BY Belarus | <input checked="" type="checkbox"/> MW Malawi |
| <input checked="" type="checkbox"/> CA Canada | <input checked="" type="checkbox"/> MX Mexico |
| <input checked="" type="checkbox"/> CH and LI Switzerland and Liechtenstein | <input checked="" type="checkbox"/> NO Norway |
| <input checked="" type="checkbox"/> CN China | <input checked="" type="checkbox"/> NZ New Zealand |
| <input checked="" type="checkbox"/> CU Cuba | <input checked="" type="checkbox"/> PL Poland |
| <input checked="" type="checkbox"/> CZ Czech Republic | <input checked="" type="checkbox"/> PT Portugal |
| <input checked="" type="checkbox"/> DE Germany | <input checked="" type="checkbox"/> RO Romania |
| <input checked="" type="checkbox"/> DK Denmark | <input checked="" type="checkbox"/> RU Russian Federation |
| <input checked="" type="checkbox"/> EE Estonia | <input checked="" type="checkbox"/> SD Sudan |
| <input checked="" type="checkbox"/> ES Spain | <input checked="" type="checkbox"/> SE Sweden |
| <input checked="" type="checkbox"/> FI Finland | <input checked="" type="checkbox"/> SG Singapore |
| <input checked="" type="checkbox"/> GB United Kingdom | <input checked="" type="checkbox"/> SI Slovenia |
| <input checked="" type="checkbox"/> GD Grenada | <input checked="" type="checkbox"/> SK Slovakia |
| <input checked="" type="checkbox"/> GE Georgia | <input checked="" type="checkbox"/> SL Sierra Leone |
| <input checked="" type="checkbox"/> GH Ghana | <input checked="" type="checkbox"/> TJ Tajikistan |
| <input checked="" type="checkbox"/> GM Gambia | <input checked="" type="checkbox"/> TM Turkmenistan |
| <input checked="" type="checkbox"/> HR Croatia | <input checked="" type="checkbox"/> TR Turkey |
| <input checked="" type="checkbox"/> HU Hungary | <input checked="" type="checkbox"/> TT Trinidad and Tobago |
| <input checked="" type="checkbox"/> ID Indonesia | <input checked="" type="checkbox"/> UA Ukraine |
| <input checked="" type="checkbox"/> IL Israel | <input checked="" type="checkbox"/> UG Uganda |
| <input checked="" type="checkbox"/> IN India | <input checked="" type="checkbox"/> US United States of America |
| <input checked="" type="checkbox"/> IS Iceland | <input checked="" type="checkbox"/> UZ Uzbekistan |
| <input checked="" type="checkbox"/> JP Japan | <input checked="" type="checkbox"/> VN Viet Nam |
| <input checked="" type="checkbox"/> KE Kenya | <input checked="" type="checkbox"/> YU Yugoslavia |
| <input checked="" type="checkbox"/> KG Kyrgyzstan | <input checked="" type="checkbox"/> ZW Zimbabwe |
| <input checked="" type="checkbox"/> KP Democratic People's Republic of Korea | <input checked="" type="checkbox"/> ZA South Africa |
| <input checked="" type="checkbox"/> KR Republic of Korea | <input checked="" type="checkbox"/> All States party to PCT as of International Filing Date |
| <input checked="" type="checkbox"/> KZ Kazakhstan | Check-boxes reserved for designating States (for the purposes of a national patent) which have become party to the PCT after issuance of this sheet: |
| <input checked="" type="checkbox"/> LC Saint Lucia | <input checked="" type="checkbox"/> CR, DM, TZ, MA, AG, MZ, DZ, BZ, PH, CO, EC, TN, OM, NI, PG, SC, SY, VC |
| <input checked="" type="checkbox"/> LK Sri Lanka | |
| <input checked="" type="checkbox"/> LR Liberia | |

In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation of a designation consists of the filing of a notice specifying that designation and the payment of the designation and confirmation fees. Confirmation must reach the receiving Office within the 15-month time limit.)

Box No. VI PRIORITY CLAIM		Further priority claims are indicated in the Supplemental Box <input type="checkbox"/>								
Filing date of earlier application (day/month/year)	Of earlier application	National application: country	Where earlier application is: regional application:* regional Office							
item (1) 09 August 2002 (09.08.02)	10/215,994	US								
item (2)										
item (3)										
<input checked="" type="checkbox"/> The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of the present international application is the receiving Office) identified above as item(s): 1										
* Where the earlier application is an ARIPO application, it is mandatory to indicate in the Supplemental Box at least one country party to the Paris Convention for the Protection of Industrial property for which that earlier application was filed (Rule 4.10(b)(ii)). See Supplemental Box.										
Box No. VII INTERNATIONAL SEARCHING AUTHORITY										
Choice of International Searching Authority (ISA) (If two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used): ISA / <u>EP</u>		Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Search Auth.): <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Date (day/month/year)</td> <td style="width: 33%;">Number</td> <td style="width: 34%;">Country (or regional Office)</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			Date (day/month/year)	Number	Country (or regional Office)			
Date (day/month/year)	Number	Country (or regional Office)								
Box No. VIII CHECK LIST										
This international application contains the following number of sheets: request : 3 description (excluding sequence listing part) : 11 claims : 4 abstract : 1 drawings : 13 sequence listing part of description : 0 Total number of sheets: 32		This international application is accompanied by the item(s) marked below: 1. <input checked="" type="checkbox"/> fee calculation sheet 2. <input type="checkbox"/> separate signed power of attorney 3. <input type="checkbox"/> copy of general power of attorney; reference number, if any: 4. <input type="checkbox"/> statement explaining lack of signature 5. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s): 6. <input type="checkbox"/> translation of the international application into (language): 7. <input type="checkbox"/> separate indications concerning deposited microorganisms or other biological material 8. <input type="checkbox"/> nucleotide and/or amino acid sequence listing in computer readable form 9. <input checked="" type="checkbox"/> other (specify): postcard, transmittal letter, check								
Figure of the drawings which should accompany the abstract: 4a		Language of filing of the international application: English								
Box No. IX SIGNATURE OF APPLICANT										
Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request). <div style="text-align: center; margin-top: 10px;">  FERRARO, Neil P. </div>										
For receiving Office use only										
1. Date of actual receipt of the purported international application:		2. Drawings <input type="checkbox"/> received <input type="checkbox"/> not received								
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:										
4. Date of timely receipt of the required corrections under PCT Article 11(2)										
5. International Searching Authority specified by the applicant: ISA /		6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid								
For International Bureau use only										
Date of receipt of the record copy by the International Bureau:										

PCT

Receiving Office use only

FEE CALCULATION SHEET

Annex to the Request

International application No. **000000000000**

Date stamp of the receiving office

Applicant's or agent's
file reference

R00579.70000

Applicant

RAMIREZ, Steven W.

CALCULATION OF PRESCRIBED FEES

- | | | |
|--------------------------|---------|---|
| 1. TRANSMITTAL FEE | 240.00 | T |
| 2. SEARCH FEE | 1020.00 | S |

International search to be carried out by US

(if two or more International Searching Authorities are competent in relation to the international application, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FEE

Basic Fee

The international application contains 32 Sheets.

first 30 sheets 476.00 b₁2 x 12.00 = 24.00 b₂

remaining sheets

additional amount

Add amounts entered at b₁ and b₂ and enter total at B 500.00 B

Designation Fees

The international application contains all including the US designations.

5 x 104.00 = 520.00 D

number of designation fees
payable (maximum 5)amount of
designation fee

Add amounts entered at B and D and enter total at I 1020.00 I

Applicants from certain States are entitled to a reduction of 75% of the international fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the sum of the amounts entered at B and D.)

4. FEE FOR PRIORITY DOCUMENT 20.00 P

5. TOTAL FEES PAYABLE

Add amounts entered at T, S, I and P, and enter total in the TOTAL box 2300.00

TOTAL

☐ The designation fees are not paid at this time.

MODE OF PAYMENT

- | | | |
|--|---|---|
| <input type="checkbox"/> authorization to charge | <input type="checkbox"/> bank draft | <input type="checkbox"/> coupons |
| deposit account (see below) | <input type="checkbox"/> cash | <input type="checkbox"/> other (specify): |
| <input checked="" type="checkbox"/> cheque | <input type="checkbox"/> revenue stamps | |
| <input type="checkbox"/> postal money order | | |

DEPOSIT ACCOUNT AUTHORIZATION (this mode of payment may not be available at all receiving Offices)

The RO/ US

☐ is hereby authorized to charge the total fees indicated above to my deposit account.☒ is hereby authorized to charge any deficiency or credit any overpayment in the total fees indicated above to my deposit account.☐ is hereby authorized to charge the fee for preparation and transmittal of the priority document to the International Bureau of WIPO to my deposit account.

23/2825

Deposit Account Number

11/08/03

Date (day/month/year)

Signature FERRARO, Neil P.